

## EARLY EDUCATION IN ARIZONA – QUALITY INDICATORS

High quality early education lays the foundation that children need to be successful in kindergarten and beyond.<sup>1</sup> Recent research has shown that children gain significant knowledge of language, reading and writing long before they enter school. High quality early education provides the building blocks for language, reading and writing development that will last throughout their lifetime.<sup>2</sup>

Research also suggests that the more time children spend in low quality child care, the more likely they are to exhibit aggressive or disobedient behavior.<sup>3</sup> A 1995 study conducted by four universities found that child care at most centers in the United States is poor to mediocre. Only one in seven centers received a rating of developmentally appropriate.<sup>4</sup>

The lack of high-quality early education programs becomes apparent when children entering kindergarten lack basic skills, such as how to positively interact with their peers, how to hold a book, or the ability to recognize letters and numbers.<sup>5</sup>

To increase the productivity of any business, employees need to be assured that the care their child is receiving is adequate, reliable and of high quality. To have a well-qualified workforce tomorrow, we must start with nurturing today's growing brains.<sup>6</sup>

### Components of quality:

**Learning Environment:** High quality child care offers activities that are appropriate for each child's age, interests and abilities. Materials are easily accessible. Children are encouraged to be actively involved in the learning process and to experience a variety of activities. There is respect for different family cultures and backgrounds. Art projects look creative and varied and express each child's interests.

Overall, the room size, equipment and its arrangement must be safe, clean and adequately serve the number of children in the group. In a quality program, most of the day is spent in space divided to invite small group activities. The room arrangement and the placement of equipment and materials will allow you to identify different activity areas such as block building, story time, and dress-up. Look for space that invites both quiet and active play. Children choose their own activities for much of the day. A smaller part of the day is for activities that the children do as a group and outdoors.<sup>7</sup>

**Standards:** Children best prepared for kindergarten have been exposed to language and pre-literacy experiences, math and science activities, and a variety of age-appropriate activities that develop and enhance reasoning, communication and problem solving. Developmentally appropriate standards allow for and recognize the socio/emotional level of a child.

The American Federation of Teachers promotes national use of standards and curricula that address early language and literacy, early numeracy, social and emotional competence, motor readiness, and physical abilities.<sup>8</sup> Although Arizona has standards, their use is not mandatory (*Guidelines for Comprehensive Early Education Programs*, revised in 2002; *Arizona Early Childhood Education Standards*, adopted in 2003). Both the Arizona standards and guidelines are strictly voluntary and the majority of proprietary and non-proprietary centers do not utilize these as guiding principles.

**Education level of the teacher:** Child care center staff includes teachers and early childhood workers. Research shows that there is a strong connection between the amount of education that the caregiver has and the quality of care they provide. Teachers/Caregivers in Arizona are required to be at least 18 years of age, have a high school diploma and 6 months of child care experience, but no prior training or professional education is required.<sup>9</sup> In comparison, a licensed hairdresser in Arizona requires 1,600 hours of training at an accredited school. The lack of or limited amount of scholarships to pursue education, pre-service training, ongoing training, or professional development affects the quality of early education programs.

**Salaries & Benefits:** Well paid providers usually stay in the same job or with the same center, for longer periods of time, meaning they can provide more stable care for children. Their job satisfaction is higher and they are less stressed, as well. The median hourly wage for child care teachers in Arizona is \$8.50 per hour.<sup>10</sup> The lack of competitive salaries and benefits creates high-turnover. Children who make attachments to stable caregivers are more likely to engage in social activities, and spend less undirected time.<sup>11</sup>

**Accreditation:** Accreditation is the voluntary process that child care programs undergo to document a higher level of care than state licensing requires. To receive accreditation a program must complete an extensive self-study, verified by a site visit by a team of trained experts and judged in substantial compliance with the accrediting body's criterion.<sup>12</sup> Programs that achieve accreditation are regularly monitored and are better able to ensure quality and demonstrate accountability regarding public funds. Approximately 10% of AZ child care centers (211 centers) have become accredited.

**Adult-to-Child Ratios:** Adult-child ratio means that there must be at least one adult for every so many children. For example, NAEYC recommends a staff-child ratio of 1:7 for 3 year olds in a group of 14 children. For three year olds, Arizona allows up to 13 children per adult, and has no group size rules. Teachers can do a better job of helping children learn and grow when they can give each child individual attention. Low staff to child ratios allow children to interact comfortably with their peers and get more individualized attention from their teachers to help them develop language and problem-solving skills.<sup>13</sup>

**Group Size:** Group size refers to the number of children who should be cared for in a single group (in other words, in one family child care home or, for centers, in one classroom). Appropriate group size depends on the ages of the children being cared for, but generally smaller sizes are better, especially for young children. Obviously, the smaller the group, the more attention each child will receive. Arizona has no rules/regulations for group size.

**Parent Involvement:** Research suggests that parents who are involved in their child's education, at all levels, motivate the child to succeed. Programs that encourage and make welcome parent involvement have more successful child outcomes.

**Access to Health Care:** Good health is also essential for school readiness. Research demonstrates that "a series of well-child visits maintained during the first 2 years of life has a positive effect on health outcomes...regardless of race, level of poverty, or health status. National efforts to improve the quality of child health services for young children should focus on increasing compliance with periodic preventive care for young children in addition to improving immunization levels."<sup>14</sup>

**Early Intervention:** Early intervention can be quite effective for young children with developmental disabilities, as well as for children who are at risk due to biological or environmental factors. Early intervention needs to be comprehensive, developmentally appropriate, and of sufficient duration and intensity. Outcomes go beyond the child's cognitive functioning to also include child developmental gains in emotional, behavioral, communication, and social spheres.<sup>15</sup>

## Endnotes:

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<sup>1</sup> National Association of Child Advocates. *Making Investments in Young Children: What the Research Tells Us*. Washington, DC: National Association of Child Advocates, December 2000.

<sup>2</sup> Early Literacy, Zero to Three, , Washington, DC, [www.zerotothree.org/brainwonders/EarlyLiteracy.html](http://www.zerotothree.org/brainwonders/EarlyLiteracy.html).

<sup>3</sup> Valdez, Linda. (7/30/03). Its Time for Working Moms to Get their Money's Worth. Arizona Republic.

<sup>4</sup> Helburn, Suzanne et al. 1993. *Cost, Quality, and Child Outcomes in Child Care Centers*

<sup>5</sup> At The Starting Line – Early Childhood Education Programs in the 50 States, American Federation of Teachers, December 2002

<sup>6</sup> [www.ncsmartstart.org](http://www.ncsmartstart.org), parent/brain

<sup>7</sup> <http://www.childcareaware.org/en/dailyparent/vol8/>

<sup>8</sup> At The Starting Line – Early Childhood Education Programs in the 50 States, American Federation of Teachers, December 2002

<sup>9</sup> Arizona Department of Health Services, Office of Child Care Licensure, Child Care Facilities Rules, R9-5-401A.2.

<sup>10</sup> Arizona Wage and Benefit Survey of Child Care/Early Childhood Education, Center-Based Personnel October 2001

<sup>11</sup> Whitebook, Howes, & Phillips (1989). Who Care? Child Care Teachers and the Quality of Care in America. Final report, National Child Care Staffing Study. Oakland, CA: Child Care Employee Project.

<sup>12</sup> Foreman, S, 1990. Professionalism, Early Care and Education Training Program, Central Arizona College

<sup>13</sup> At The Starting Line – Early Childhood Education Programs in the 50 States, American Federation of Teachers, December 2002

<sup>14</sup> Rosemarie B. Hakim and Barry V. Bye. Effectiveness of Compliance With Pediatric Preventive Care Guidelines Among Medicaid Beneficiaries. PEDIATRICS Vol. 108 No. 1 July 2001, pp. 90-97

<sup>15</sup> Baker, Bruce and Kristin A. Feinfeld. *Early Intervention*. Current Opinions in Psychiatry 16(5):503-509, 2003.